

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Southern District of TexasCase number (if known): _____ Chapter 7 Check if this is an amended filing**Official Form 201****Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/25

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>ER 365, LLC</u>		
2. All other names debtor used in the last 8 years	<u>Heights Emergency Room</u>		
Include any assumed names, trade names, and <i>doing business as names</i>			
3. Debtor's federal Employer Identification Number (EIN)	<u>8 2 - 3 9 8 9 9 2 7</u>		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business	
	<u>Roberto Ochoa, Registered Agent</u>		
	<u>5900 Balcones Drive</u>		
	Number <u> </u> Street <u> </u>	Number <u> </u> Street <u> </u>	
	<u>Austin, TX 78731</u>	City <u> </u> State <u> </u> ZIP Code <u> </u>	City <u> </u> State <u> </u> ZIP Code <u> </u>
	<u>Travis</u>	County <u> </u>	
		Location of principal assets, if different from principal place of business	
		Number <u> </u> Street <u> </u>	
		City <u> </u> State <u> </u> ZIP Code <u> </u>	
5. Debtor's website (URL)			
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		

Debtor

ER 365, LLC

Name

Case number (if known) _____

7. Describe debtor's business*A. Check one:*

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Railroad (as defined in 11 U.S.C. §101(44))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 Clearing Bank (as defined in 11 U.S.C. §781(3))
 None of the above

B. Check all that apply:

Tax-exempt entity (as described in 26 U.S.C. §501)
 Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
 Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes> .

8. Under which chapter of the Bankruptcy Code is the debtor filing?*Check one:*

Chapter 7
 Chapter 9
 Chapter 11. *Check all that apply:*

Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,424,000 (amount subject to adjustment on 4/01/28 and every 3 years after that).
 The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
 A plan is being filed with this petition.
 Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
 The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
 The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years? No

Yes. District _____ When _____ Case number _____
 MM / DD / YYYY

District _____ When _____ Case number _____
 MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

If more than 2 cases, attach a separate list.

 No

Yes. Debtor _____ Relationship _____
 District _____ When _____
 MM / DD / YYYY

Case number, if known _____

Debtor

ER 365, LLC

Name

Case number (if known) _____

11. Why is the case filed in this district?*Check all that apply:*

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention? No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other _____

Where is the property?

Number _____ Street _____

City _____ State _____ ZIP Code _____

Is the property insured? No

Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds?***Check one:*

Funds will be available for distribution to unsecured creditors.

After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

1-49 50-99 1,000-5,000 5,001-10,000 25,001-50,000 50,000-100,000

100-199 200-999 10,001-25,000 More than 100,000

15. Estimated assets

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input checked="" type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Debtor

ER 365, LLC

Name

Case number (if known) _____

16. Estimated liabilities

<input type="checkbox"/> \$0-\$50,000	<input checked="" type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 07/21/2025

MM/ DD/ YYYY

X /s/ Roberto Ochoa

Signature of authorized representative of debtor

Roberto Ochoa

Printed name

Title Member/Manager**18. Signature of attorney**X /s/ Randy W. Williams

Signature of attorney for debtor

Date 07/21/2025

MM/ DD/ YYYY

Randy W. Williams

Printed name

Byman & Associates, PLLC

Firm name

7924 Broadway Ste 104

Number Street

Pearland

City

TX

State

77581

ZIP Code

(281) 884-9262

Contact phone

rww@bymanlaw.com

Email address

21566850

Bar number

TX

State

**WRITTEN CONSENT OF THE
REQUISITE MEMBERS OF ER365, LLC**

The required members of ER365, LLC, a Texas limited liability company (the "Company"), and pursuant to the provisions of Section 101.359 of the Texas Liability Company Act, hereby consent to the adoption of the Company of the following resolutions and to the action authorized in such resolutions being taken by the Company in lieu of a meeting thereof:

RESOLVED, that the Company should liquidated by filing for bankruptcy protection under Chapter 7 of the Bankruptcy Code with an appropriate federal bankruptcy court sitting in Harris County, Texas;

RESOLVED, that Roberto Ochoa, as Member Manager of the Company, is hereby authorized and directed to prepare or cause to be prepared the voluntary petition and to cause the initiation and prosecution of a case under the Bankruptcy Code (the "Bankruptcy Case");

RESOLVED, that the Company is authorized and directed to employ and retain the firm of Byman & Associates PLLC, to represent the Company in its case under the Bankruptcy Code upon such retainer and compensation agreement as may seem in the sole discretion of the Manager to be appropriate;

RESOLVED, that any and all actions taken by Roberto Ochoa for the Company, and for and on behalf and in the name of this Company, prior to the adoption of the foregoing resolutions, in connection with any of the foregoing matters, be and they are hereby, ratified, confirmed and approved in all respects for all purposes; and

RESOLVED, Roberto Ochoa (and his designees and delegates) be, and hereby is, authorized, empowered, and directed to take all actions, or to not take any action in the name of the Company, with respect to the transactions contemplated by these resolutions hereunder, as such Manager shall deem necessary or desirable in such Manager's reasonable business judgment, as may be necessary or convenient to effectuate the purposes of the transactions contemplated herein.

IN WITNESS WHEREOF, the undersigned Members have executed this Written Consent effective as of July 18, 2025.

MEMBERS:

ER365, LLC
a Texas limited liability company

By: 

Name: Roberto Ochoa
Title: Member Manager

By: 

Name: Cesar Augusto Dias
Title: Member Manager

By: 

Name: Omar Mendoza
Title: Member Manager

Fill in this information to identify the case:

Debtor Name	ER 365, LLC		
United States Bankruptcy Court for the:	Southern	District of	Texas
Case number (If known):			

Check if this is an amended filing

Official Form 206A/B**Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

No. Go to Part 2.

Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Stellar Bank xx6893Checking account6 8 9 3\$1,625.153.2. SouthState Bank xx5897 (formerly Independent Financial Bank)Checking account5 8 9 7\$53,845.15**4. Other cash equivalents (Identify all)**

4.1

4.2

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$55,470.30**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

No. Go to Part 3.

Yes. Fill in the information below.

Current value of debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

Debtor ER 365, LLC

Name

Case number (if known) _____

7.1 _____

7.2 _____

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1 _____

8.2 _____

9. **Total of Part 2**

Add lines 7 through 8. Copy the total to line 81.

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?** No. Go to Part 4. Yes. Fill in the information below.**Current value of debtor's interest**11. **Accounts receivable**

11a. 90 days old or less: _____ - _____ =..... → _____

face amount

doubtful or uncollectible accounts

11b. Over 90 days old: _____ - _____ =..... → _____

face amount

doubtful or uncollectible accounts

12. **Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

Part 4: Investments

13. **Does the debtor own any investments?** No. Go to Part 5. Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest**14. **Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1 _____

14.2 _____

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity:

% of ownership:

15.1. _____

15.2. _____

Debtor ER 365, LLC
Name

Case number (if known) _____

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1 _____

16.2 _____

17. **Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?** No. Go to Part 6. Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

19. **Raw materials**

MM / DD / YYYY

20. **Work in progress**

MM / DD / YYYY

21. **Finished goods, including goods held for resale**

MM / DD / YYYY

22. **Other inventory or supplies**

MM / DD / YYYY

23. **Total of Part 5**

Add lines 19 through 22. Copy the total to line 84.

24. **Is any of the property listed in Part 5 perishable?** No Yes25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?** No Yes. Book value _____ Valuation method _____ Current value _____26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?** No Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

Debtor ER 365, LLC

Name

Case number (if known) _____

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

 No. Go to Part 7. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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28. Crops—either planted or harvested

29. Farm animals Examples: Livestock, poultry, farm-raised fish

30. Farm machinery and equipment (Other than titled motor vehicles)

31. Farm and fishing supplies, chemicals, and feed

32. Other farming and fishing-related property not already listed in Part 6

33. Total of Part 6

Add lines 28 through 32. Copy the total to line 85.

34. Is the debtor a member of an agricultural cooperative?

 No Yes. Is any of the debtor's property stored at the cooperative? No Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

 No Yes. Book value _____ Valuation method _____ Current value _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

 No Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

 No Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

 No. Go to Part 8. Yes. Fill in the information below.

Debtor ER 365, LLC Case number (if known) _____
 Name _____

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture	_____	_____	_____
40. Office fixtures	_____	_____	_____
41. Office equipment, including all computer equipment and communication systems equipment and software	_____	_____	_____
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles	42.1 _____	_____	_____
	42.2 _____	_____	_____
	42.3 _____	_____	_____
43. Total of Part 7 Add lines 39 through 42. Copy the total to line 86.			
44. Is a depreciation schedule available for any of the property listed in Part 7?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
45. Has any of the property listed in Part 7 been appraised by a professional within the last year?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Part 8: Machinery, equipment, and vehicles			
46. Does the debtor own or lease any machinery, equipment, or vehicles?	<input checked="" type="checkbox"/> No. Go to Part 9. <input type="checkbox"/> Yes. Fill in the information below.		
General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)		Net book value of debtor's interest (Where available)	Valuation method used for current value
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles		Current value of debtor's interest	
47.1 _____	_____	_____	_____
47.2 _____	_____	_____	_____
47.3 _____	_____	_____	_____
47.4 _____	_____	_____	_____

Debtor ER 365, LLC

Name

Case number (if known) _____

48. **Watercraft, trailers, motors, and related accessories** Examples:
Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____

48.2 _____

49. **Aircraft and accessories**

49.1 _____

49.2 _____

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

51. **Total of Part 8**

Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

No
 Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

No
 Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

No. Go to Part 10.
 Yes. Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
--	--	--	---	------------------------------------

55.1 _____

55.2 _____

55.3 _____

55.4 _____

55.5 _____

55.6 _____

56. **Total of Part 9**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

Debtor ER 365, LLC
Name

Case number (if known) _____

57. Is a depreciation schedule available for any of the property listed in Part 9?

No
 Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

No
 Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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60. Patents, copyrights, trademarks, and trade secrets

61. Internet domain names and websites

62. Licenses, franchises, and royalties

63. Customer lists, mailing lists, or other compilations

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10

Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

No
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No
 Yes

Part 11: All other assets

Debtor ER 365, LLC
Name

Case number (if known) _____

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

 No. Go to Part 12. Yes. Fill in the information below.Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

	Total face amount	-	doubtful or uncollectible amount	→
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72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

	Tax year			
	Tax year			
	Tax year			

73. Interests in insurance policies or annuities

--	--	--	--	--

74. Causes of action against third parties (whether or not a lawsuit has been filed)

--	--	--	--	--

Nature of claim _____

Amount requested _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

--	--	--	--	--

Nature of claim _____

Amount requested _____

76. Trusts, equitable or future interests in property

--	--	--	--	--

77. Other property of any kind not already listed Examples: Season tickets, country club membership

--	--	--	--	--

--	--	--	--	--

78. Total of Part 11

Add lines 71 through 77. Copy the total to line 90.

Debtor ER 365, LLC

Case number (if known) _____

Name

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No
 Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	<u>\$55,470.30</u>	
81. Deposits and prepayments. Copy line 9, Part 2.		
82. Accounts receivable. Copy line 12, Part 3.		
83. Investments. Copy line 17, Part 4.		
84. Inventory. Copy line 23, Part 5.		
85. Farming and fishing-related assets. Copy line 33, Part 6.		
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.		
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.		
88. Real property. Copy line 56, Part 9.....	→	
89. Intangibles and intellectual property. Copy line 66, Part 10.		
90. All other assets. Copy line 78, Part 11.	+	
91. Total. Add lines 80 through 90 for each column.....	<u>\$55,470.30</u>	+ 91b. <u></u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		<u>\$55,470.30</u>

Fill in this information to identify the case:

Debtor name	ER 365, LLC		
United States Bankruptcy Court for the:	Southern	District of	Texas
Case number (if known):	_____		

Check if this is an amended filing

Official Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1 Creditor's name	Describe debtor's property that is subject to a lien	_____	
Creditor's mailing address	_____	_____	
Creditor's email address, if known	Describe the lien	_____	
Date debt was incurred	Is the creditor an insider or related party?	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number	Is anyone else liable on this claim?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is:	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<input type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority. _____ _____			

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. _____

Fill in this information to identify the case:

Debtor name ER 365, LLC

United States Bankruptcy Court for the:

Southern District of Texas

Case number (if known): _____

 Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)**

No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address <hr/> <hr/> <hr/>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred <hr/>	Basis for the claim: <hr/>	
Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) _____		
2.2 Priority creditor's name and mailing address <hr/> <hr/> <hr/>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred <hr/>	Basis for the claim: <hr/>	
Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) _____		

Debtor

ER 365, LLC

Name

Case number (if known)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address Bayou City Mediation Center 4900 Fournace Place Suite 200 Bellaire, TX 77401	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$475.00</u>
3.2	Nonpriority creditor's name and mailing address Cadillac Law 1341 W Mockinbird Ln #600W Dallas, TX 75247	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$500.00</u>
3.3	Nonpriority creditor's name and mailing address Carissa Clampett c/o Moore & Associates Lyric Centre 440 Louisiana Street Suite 1110 Houston, TX 77002-1055	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Lawsuit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Remarks: 2023-30603 pending in the 333rd District, Harris County</p>	<u>unknown</u>
3.4	Nonpriority creditor's name and mailing address Carla Trice 1124 Walling St Houston, TX 77009	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$200.00</u>

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3.5	Nonpriority creditor's name and mailing address Carla Trice 1124 Walling St Houston, TX 77009	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$25.00
	Date or dates debt was incurred <u>08/07/24</u>	Basis for the claim: _____	
	Last 4 digits of account number <u>9 9 4 7</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address Caroline Morris 887 W Wintergreen Rd Lancaster, TX 75134	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$400.00
	Date or dates debt was incurred <u>06/24/24</u>	Basis for the claim: _____	
	Last 4 digits of account number <u>2 8 2 7</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.7	Nonpriority creditor's name and mailing address Comcast Business PO Box 70219 Philadelphia, PA 19176-0219	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,944.03
	Date or dates debt was incurred _____	Basis for the claim: Utilities _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.8	Nonpriority creditor's name and mailing address Crystal Resolutions 1085 Elkins Lake 305 Broadmoor Dr Huntsville, TX 77340	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$125.00
	Date or dates debt was incurred <u>05/10/24</u>	Basis for the claim: _____	
	Last 4 digits of account number <u>0 1 6 0</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.9	Nonpriority creditor's name and mailing address <u>Crystal Resolutions</u> <u>1085 Elkins Lake</u> <u>305 Broadmoor Dr</u> <u>Huntsville, TX 77340</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$125.00
		Basis for the claim: _____	
	Date or dates debt was incurred <u>05/16/24</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>0 1 7 2</u>		
3.10	Nonpriority creditor's name and mailing address <u>Cypress Cash Flow Services</u> <u>7050 Brookhollow West Drive #41507</u> <u>Houston, TX 77040</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$500.00
		Basis for the claim: _____	
	Date or dates debt was incurred <u>12/01/23</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>2 6 5 8</u>		
3.11	Nonpriority creditor's name and mailing address <u>DeHaan & Bach</u> <u>25 Whitney Drive Suite 106</u> <u>Milford, OH 45150</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$148,311.13
		Basis for the claim: <u>A/R</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
	Remarks: Collecting for GE Healthcare; demand letter sent 09/04/24		
3.12	Nonpriority creditor's name and mailing address <u>Diamond McCarthy LLP</u> <u>Two Houston Center</u> <u>909 Fannin 37th Floor</u> <u>Houston, TX 77010</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	unknown
		Basis for the claim: _____	
	Date or dates debt was incurred <u>04/04/24</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

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3.13	Nonpriority creditor's name and mailing address <u>Direct Radiology</u> <u>22100 Bothell Everett Hwy Bldg C</u> <u>Bothell, WA 98021</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$11,165.00
		Basis for the claim: _____	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.14	Nonpriority creditor's name and mailing address <u>DirecTV AT&T</u> <u>c/o CT Corporation</u> <u>1209 Orange Street</u> <u>Wilmington, DE 19801</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$313.18
		Basis for the claim: _____	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.15	Nonpriority creditor's name and mailing address <u>Dykema</u> <u>400 Renaissance Center</u> <u>Detroit, MI 48243</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$375,000.00
		Basis for the claim: _____	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.16	Nonpriority creditor's name and mailing address <u>El Paso Emergency Room</u> <u>3281 Joe Battle Blvd</u> <u>El Paso, TX 79936</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$30,000.00
		Basis for the claim: _____	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

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3.17	Nonpriority creditor's name and mailing address <u>Elavon</u> <u>2103 Blue Willow Dr</u> <u>Houston, TX 77042</u>	As of the petition filing date, the claim is: <u>\$106.29</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address <u>Fran Brochstein</u> <u>PO Box 1925</u> <u>Marble Falls, TX 78654</u>	As of the petition filing date, the claim is: <u>\$800.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address <u>GE Healthcare</u> <u>3615 Willowbend Blvd</u> <u>Houston, TX 77054</u>	As of the petition filing date, the claim is: <u>\$148,311.13</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.20	Nonpriority creditor's name and mailing address <u>Gordon Davis Johnson Shane</u> <u>4695 N Mesa St</u> <u>El Paso, TX 79912</u>	As of the petition filing date, the claim is: <u>\$250.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.21	Nonpriority creditor's name and mailing address <u>Heat Transfer Solutions</u> <u>3350 Yale St</u> <u>Houston, TX 77018</u>	As of the petition filing date, the claim is: <u>\$876.82</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: _____
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	Nonpriority creditor's name and mailing address <u>Henry Schein</u> <u>4333 W Sam Houston Pkwy N</u> <u>Houston, TX 77043</u>	As of the petition filing date, the claim is: <u>\$75.49</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: _____
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address <u>Janice Puncy Slaughter</u> <u>5735 Hirondel Street</u> <u>Houston, TX 77033</u>	As of the petition filing date, the claim is: <u>\$300.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: _____
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address <u>Janice Puncy Slaughter</u> <u>5735 Hirondel Street</u> <u>Houston, TX 77033</u>	As of the petition filing date, the claim is: <u>\$300.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: _____
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.25	Nonpriority creditor's name and mailing address <u>Joseph Maslar, MD, PLLC</u> <u>c/o Rusty Hardin & Associates LLP</u> <u>5 Houston Center</u> <u>1401 McKinney Street Suite 2250</u> <u>Houston, TX 77010</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	unknown
		Basis for the claim: <u>Lawsuit</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred	_____	
	Last 4 digits of account number	_____	
	Remarks: 2021-44424 pending in the 80th District, Harris County		
3.26	Nonpriority creditor's name and mailing address <u>Justice David L Hodges</u> <u>214 Laurel Oaks Ln</u> <u>Crawford, TX 76638</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$750.00
		Basis for the claim: _____	
	Date or dates debt was incurred	<u>12/13/24</u>	
	Last 4 digits of account number	<u>4 9 0 6</u>	
3.27	Nonpriority creditor's name and mailing address <u>Justice Guadalupe Rivera</u> <u>14 Silver Crest Drive</u> <u>El Paso, TX 79902</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,250.00
		Basis for the claim: _____	
	Date or dates debt was incurred	<u>05/10/24</u>	
	Last 4 digits of account number	<u>2 7 9 0</u>	
3.28	Nonpriority creditor's name and mailing address <u>Kim Carmack</u> <u>710 Lost Star</u> <u>San Antonio, TX 78258</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$375.00
		Basis for the claim: _____	
	Date or dates debt was incurred	<u>03/12/24</u>	
	Last 4 digits of account number	<u>4 8 2 6</u>	

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3.29	Nonpriority creditor's name and mailing address <u>KM Law PLLC</u> <u>3955 Fort St</u> <u>Lincoln Park, MI 48146</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$600.00
	Date or dates debt was incurred <u>05/10/24</u>	Basis for the claim: _____	
	Last 4 digits of account number <u>4 4 3 8</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.30	Nonpriority creditor's name and mailing address <u>Laconda Davies Goree</u> <u>14275 Midway Rd</u> <u>Addison, TX 75001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$375.00
	Date or dates debt was incurred <u>05/31/24</u>	Basis for the claim: _____	
	Last 4 digits of account number <u>8 4 6 4</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.31	Nonpriority creditor's name and mailing address <u>Law Office of Frederick Wagner</u> <u>9839 Vogue Ln</u> <u>Houston, TX 77080</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$300.00
	Date or dates debt was incurred <u>06/07/24</u>	Basis for the claim: _____	
	Last 4 digits of account number <u>2 7 9 9</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.32	Nonpriority creditor's name and mailing address <u>Linda Bass</u> <u>ADR4U2</u> <u>PO Box 996</u> <u>Keller, TX 76244</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$400.00
	Date or dates debt was incurred <u>01/29/24</u>	Basis for the claim: _____	
	Last 4 digits of account number <u>9 1 3 9</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.33	Nonpriority creditor's name and mailing address <u>Making Talk Work</u> <u>Attn: Jen Sims</u> <u>Address</u> <u>Austin, TX 73301</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$425.00
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred <u>02/07/24</u>		
	Last 4 digits of account number <u>1 3 0 2</u>		
3.34	Nonpriority creditor's name and mailing address <u>McKesson</u> <u>20710 Hempstead Rd</u> <u>Houston, TX 77065</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$17,671.84
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred _____		
	Last 4 digits of account number _____		
3.35	Nonpriority creditor's name and mailing address <u>Melanie Grimes</u> <u>Turley Law</u> <u>6440 N Central Expy Suite 760</u> <u>Dallas, TX 75206</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$475.00
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred <u>08/30/24</u>		
	Last 4 digits of account number <u>3 8 6 4</u>		
3.36	Nonpriority creditor's name and mailing address <u>Montrose ER LLC</u> <u>8007 Walnut Hill Ln</u> <u>Dallas, TX 75231-4313</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$600,000.00
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred _____		
	Last 4 digits of account number _____		

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3.37	Nonpriority creditor's name and mailing address <u>Preston Hollow Loan</u> <u>8007 Walnut Hill Ln</u> <u>Dallas, TX 75231</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$73,205.00
	Date or dates debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.38	Nonpriority creditor's name and mailing address <u>Quantas Healthcare Management</u> <u>5150 Lemmon Ave Suite 108</u> <u>Dallas, TX 75209</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$120,000.00
	Date or dates debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.39	Nonpriority creditor's name and mailing address <u>Quest Lab</u> <u>1631 North Loop W Suite 170</u> <u>Houston, TX 77008</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,027.91
	Date or dates debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.40	Nonpriority creditor's name and mailing address <u>Ricoh Business Solutions</u> <u>THIS ADDRESS PERMANENTLY CLOSED</u> <u>2900 North Loop W Suite 100</u> <u>Houston, TX 77092</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,206.77
	Date or dates debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.41	Nonpriority creditor's name and mailing address <u>Rochal Imaging</u> <u>2717 Commercial Ctr Blvd Ste E221</u> <u>Katy, TX 77494</u>	As of the petition filing date, the claim is: <u>\$3,800.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.42	Nonpriority creditor's name and mailing address <u>Rokes Mediation</u> <u>49 San Jacinto St Suite 220</u> <u>Houston, TX 77002</u>	As of the petition filing date, the claim is: <u>\$300.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____
	Date or dates debt was incurred <u>03/21/24</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.43	Nonpriority creditor's name and mailing address <u>Ronald L Johnson</u> <u>6025 Sun Ray Drive</u> <u>Denton, TX 76208</u>	As of the petition filing date, the claim is: <u>\$300.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____
	Date or dates debt was incurred <u>02/04/24</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.44	Nonpriority creditor's name and mailing address <u>Stories to Solutions</u> <u>923 Congress Ave Suite 300</u> <u>Austin, TX 78701</u>	As of the petition filing date, the claim is: <u>\$200.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____
	Date or dates debt was incurred <u>11/23/23</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>6 1 2 8</u>	
	Last 4 digits of account number <u>6 6 6 3</u>	

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3.45	Nonpriority creditor's name and mailing address <u>The Davis Law Firm</u> <u>3100 Richmond Ave Suite 480</u> <u>Houston, TX 77098</u>	As of the petition filing date, the claim is: <u>\$200.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred <u>03/24/24</u>	Basis for the claim: _____
	Last 4 digits of account number <u>3 9 0 0</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.46	Nonpriority creditor's name and mailing address <u>The Peace Group</u> <u>3838 N Sam Houston Pkwy E Suite 175</u> <u>Houston, TX 77032</u>	As of the petition filing date, the claim is: <u>\$450.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred <u>05/09/24</u>	Basis for the claim: _____
	Last 4 digits of account number <u>- 3 7 6</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	Nonpriority creditor's name and mailing address <u>Tom Bartley</u> <u>116 South Park</u> <u>Brenham, TX 77833</u>	As of the petition filing date, the claim is: <u>\$621.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred <u>06/03/24</u>	Basis for the claim: _____
	Last 4 digits of account number <u>5 - u m</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.48	Nonpriority creditor's name and mailing address <u>Totz Ellison & Totz</u> <u>Attn: Andrew Totz</u> <u>2211 Norfolk Suite 510</u> <u>Houston, OH 77098</u>	As of the petition filing date, the claim is: <u>unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred _____	Basis for the claim: <u>A/R</u>
	Last 4 digits of account number <u>-----</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Remarks: Atorneys for Triple D Uniform Rental, Inc.; lawsuit filed in Harris County Civil Court at Law No. 2; Cause No. 1226982	

Debtor

ER 365, LLC

Name

Case number (if known) _____

Part 2: Additional Page

3.49	Nonpriority creditor's name and mailing address Triple D Uniform 4031 Southerland Rd Houston, TX 77092	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$41,741.10
	Date or dates debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.50	Nonpriority creditor's name and mailing address TyBrion Services 5920 Lovell Ave Fort Worth, TX 76107	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$175.00
	Date or dates debt was incurred <u>06/04/24</u>	Basis for the claim: _____	
	Last 4 digits of account number <u>0 2 0 4</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.51	Nonpriority creditor's name and mailing address Tyvan Billing 6030 S Rice Suite C Houston, TX 77081	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$40,931.20
	Date or dates debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.52	Nonpriority creditor's name and mailing address Zhang Yan 349 Queensbridge Way Henderson, NV 89074	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$295.00
	Date or dates debt was incurred <u>09/06/24</u>	Basis for the claim: _____	
	Last 4 digits of account number <u>9 0 6 b</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

ER 365, LLC

Name

Case number (if known) _____

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Decaan & Bach Attn: Michael Bach 25 Whitney Drive Suite 106 Milford, OH 45150	Line <u>3.19</u> <input type="checkbox"/> Not listed. Explain _____	<u>7</u> <u>0</u> <u>5</u> <u>4</u>
4.2	Totz Ellison & Totz Attn: Andrew Totz 2211 Norfolk Suite 510 Houston, OH 77098	Line <u>3.49</u> <input type="checkbox"/> Not listed. Explain _____	<u>6</u> <u>9</u> <u>8</u> <u>2</u>

Debtor

ER 365, LLC

Name

Case number (if known) _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**5. Add the amounts of priority and nonpriority unsecured claims.**

			Total of claim amounts
5a. Total claims from Part 1	5a.		<u>\$0.00</u>
5b. Total claims from Part 2	5b.	+	<u>\$1,629,177.89</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.		<u>\$1,629,177.89</u>

Fill in this information to identify the case:

Debtor name	ER 365, LLC		
United States Bankruptcy Court for the:	Southern	District of	Texas
Case number (If known):	_____ 7		
(State)			

Check if this is an amended filing

Official Form 206G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.2	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.3	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.4	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.5	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____

Fill in this information to identify the case:

Debtor name ER 365, LLC

United States Bankruptcy Court for the: Southern District of Texas
(State)

Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. **Does the debtor have any codebtors?**
 No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes
2. **In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G.** Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Debtor ER 365, LLC Case number (if known) _____
 Name _____

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
	Name	Name	Check all schedules that apply:
2.5	<p>Street</p> <hr/> <p>City State ZIP Code</p>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6	<p>Street</p> <hr/> <p>City State ZIP Code</p>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name ER 365, LLC

United States Bankruptcy Court for the:

Southern District of TexasCase number (if known): _____ Chapter 7 Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real Property:**Copy line 88 from *Schedule A/B*.....\$0.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*.....\$55,470.30**1c. Total of all property:**Copy line 92 from *Schedule A/B*.....\$55,470.30**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....\$0.00**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....\$0.00**3b. Total amount of claims of non-priority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....+ \$1,629,177.89**4. Total liabilities.....**

Lines 2 + 3a + 3b

\$1,629,177.89

Fill in this information to identify the case:

Debtor name ER 365, LLC

United States Bankruptcy Court for the:

Southern District of Texas

Case number (if known): _____

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206A-Summary)
- Amended Schedule* _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 07/21/2025
MM/ DD/ YYYY

 /s/ Roberto Ochoa
Signature of individual signing on behalf of debtor

Roberto Ochoa
Printed name

Member/Manager
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name ER 365, LLCUnited States Bankruptcy Court for the:
Southern District of Texas

Case number (if known): _____

 Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy** 04/25

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business** None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year		Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>01/01/2025</u> to _____ MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$0.00
For prior year:	From <u>01/01/2024</u> to <u>12/31/2024</u> MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$913,861.00
For the year before that:	From <u>01/01/2023</u> to <u>12/31/2023</u> MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$4,892,984.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

 None

		Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>01/01/2025</u> to _____ MM/ DD/ YYYY		
For prior year:	From <u>01/01/2024</u> to <u>12/31/2024</u> MM/ DD/ YYYY		
For the year before that:	From <u>01/01/2023</u> to <u>12/31/2023</u> MM/ DD/ YYYY		

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$8,575. (This amount may be adjusted on 4/01/28 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

 None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer Check all that apply
3.1. Creditor's name _____ Street _____ _____	_____	_____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

City _____ State _____ ZIP Code _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$8,575. (This amount may be adjusted on 4/01/28 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

 None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Creditor's name _____ Street _____ _____	_____	_____	_____

City _____ State _____ ZIP Code _____

Relationship to debtor _____

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

 None

Creditor's name and address	Description of the property	Date	Value of property
-----------------------------	-----------------------------	------	-------------------

5.1. _____
Creditor's nameStreet

City _____ State _____ ZIP Code _____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

 None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

6.1. _____
Creditor's name

XXXX- _____

Street

City _____ State _____ ZIP Code _____

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

 None

Case title	Nature of case	Court or agency's name and address	Status of case
<u>Joseph Maslar MD, PLLC v ER 365, LLC d/b/a Heights Emergency Room and Robert J. Phelan, III, MD</u>	<u>Breach of Contract; trial on hold pending appointment of executor of the estate of Robert J. Phelan, III, MD</u>	<u>80th Judicial District Court, Harris County, Texas Name 201 Caroline 9th Floor Street</u>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<u>Case number</u> <u>2021-44424</u>		<u>Houston, TX 77002</u> City _____ State _____ ZIP Code _____	

Case title	Nature of case	Court or agency's name and address	Status of case
<u>Triple D Uniform Rental, Inc. vs. ER 365, LLC dba The Heights Emergency Room</u>	<u>Debt</u>	<u>County Civil Court At Law No 2, Harris County, Texas Name 201 Caroline Rm#517 Street</u>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
<u>Case number</u> <u>1226982</u>		<u>Houston, TX 77002</u> City _____ State _____ ZIP Code _____	

7.3. Case title GE Healthcare vs. ER 365, LLC	Nature of case Demand letter sent 09/04/2024 for outstanding balance of \$148,311.13	Court or agency's name and address n/a	Status of case <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number <hr/> 2023-30603		City <hr/> Houston, TX 77002	State <hr/> TX
7.4. Case title Carissa Clampett vs ER 365, LLC d/b/a The Heights Emergency Room, Montrose ER, LLC d/b/a Montrose Emergency Room, & Robert J. Phelan, III	Nature of case Discrimination and harassment suit set for trial 01/26/2026	Court or agency's name and address In the District Court Of Harris County 333rd Judicial District	Status of case <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number <hr/> 2023-30603		City <hr/> Houston, TX 77002	State <hr/> TX

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

8.1. Custodian's name and address	Description of the property	Value
Custodian's name	Case title	Court name and address
Street		Name
City	Case number	Street
State		
ZIP Code	Date of order or assignment	City
		State
		ZIP Code

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

9.1. Recipient's name and address	Description of the gifts or contributions	Dates given	Value
Recipient's name			
Street			
City	State	ZIP Code	
Recipient's relationship to debtor			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

 None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

10.1. _____

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

 None

11.1. Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
Byman & Associates, PLLC	Attorney's Fee	02/24/2025	\$14,662.00
Address	Filing Fee	02/24/2025	\$338.00

7924 Broadway Ste 104

Street

Pearland, TX 77581

City State ZIP Code

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

12.1. Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
Trustee			

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

13.1. Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
<u>Care Plus Heights ER, LLC</u>	<u>All inventory, medical supplies, office supplies, furniture and medical equipment were sold to Care Plus Heights, LLC. All proceeds from the sale of assets were deposited directly into the business account held at Stellar Bank and credited to the outstanding balance of the business loan. The lease agreement was also transferred to Care Plus Heights, LLC. ER 365, LLC was released from all lease obligations. The lease was never in default.</u>	<u>APA dated 05/31/2024</u>	<u>\$300,000.00</u>
Address			
Street			
City State ZIP Code			
Relationship to debtor			
None			

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

14.1. Address	Dates of occupancy
<u>5150 Lemmon Avenue Suite 108</u>	<u>From 2019 To 2024</u>
Street	
<u>Dallas, TX 75209</u>	
City	State ZIP Code

Name

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

 No. Go to Part 9. Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1. Heights Emergency Room Facility name 101 N Loop W Suite 300 Street Houston, TX 77018 City State ZIP Code	Emergency Room Services Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. 101 N Loop W #300 Houston, TX 77018	n/a How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

 No. Yes.**Patient name, address, and health insurance information**

State the nature of the information collected and retained.

Does the debtor have a privacy policy about that information?

 No Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?

 No. Go to Part 10. Yes. Does the debtor serve as plan administrator? No. Go to Part 10. Yes. Fill in below:

Name of plan	Employer identification number of the plan
_____	EIN: _____

Has the plan been terminated?

 No Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

 None

Name

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
--	---------------------------------	-----------------	--	---

18.1 _____ XXXX- _____

Name _____
Street _____
City _____ State _____ ZIP Code _____

Checking _____
 Savings _____
 Money market _____
 Brokerage _____
 Other _____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

 None

19.1 Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	Address _____ _____	_____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

 None

20.1 Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	Address _____ _____	_____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

 None

Owner's name and address	Location of the property	Description of the property	Value
Name			
Street			
City	State ZIP Code		

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name		<input type="checkbox"/> Pending
	Street		<input type="checkbox"/> On appeal
	City State ZIP Code		<input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

24. Has the debtor notified any governmental unit of any release of hazardous material?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City	City	State ZIP Code	State ZIP Code

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Name Street City State ZIP Code		EIN: _____ Dates business existed From _____ To _____

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address	Dates of service
26a.1. A. Carey Johnson (Accountant) Name 104 E 26th St Street Houston, TX 77008 City State ZIP Code	From <u>2019</u> To <u>present</u>
Name and address	Dates of service
26a.2. Bart Stonestreet (Bookkeeper) Name 17813 Plantation Dr Street Waller, TX 77484 City State ZIP Code	From <u>2019</u> To <u>present</u>

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name

Name and address**Dates of service**

26b.1.

Name

From _____ To _____

Street

City

State

ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

 None**Name and address****If any books of account and records are unavailable, explain why**

26c.1.

Bart Stonestreet (Bookkeeper)

Name

17813 Plantation Dr

Street

Waller, TX 77484

City

State

ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

 None**Name and address**

26d.1.

Name

Street

City

State

ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

 No Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory****Jose Muniz****\$0.00****Name and address of the person who has possession of inventory records**27.1. **Roberto Ochoa**

Name

805 Rosinante

Street

EI Paso, TX 79922

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Robert Phelan	9231 Westview Rd Houston, TX 77055	CEO, Managing Member,	11.11%
David Earl Bryan	915 Park Dr El Paso, TX 79902	Member,	11.11%
Jong Kim	8004 Conneste Dr Mckinney, TX 75070	Member,	11.11%
Omar Mendoza	284 Benson Lane Coppell, TX 75019	Member Manager,	11.11%
Roberto Ochoa	805 Rosinante El Paso, TX 79922	Member Manager,	11.11%
Cesar Augusto Dias	6488 Elm Crest Ct Fort Worth, TX 76132	Member Manager,	11.11%
Rithy Sok	5840 Grass Hill Dr San Antonio, TX 78238	Member,	11.11%
Yo Atteberry	17440 SE Highway 224 Damascus, OR 97089	Member,	11.11%
Clifford Janke	3649 Maya Lizabeth Pl El Paso, TX 79938	Member,	11.11%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			From _____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No

Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value

30.1.

Name _____

Street _____

City _____ State _____ ZIP Code _____

Relationship to debtor _____

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No

Name

 Yes. Identify below.**Name of the parent corporation****Employer Identification number of the parent corporation**

EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund? No Yes. Identify below.**Name of the pension fund****Employer Identification number of the pension fund**

EIN: _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 07/21/2025
MM/ DD/ YYYY

 /s/ Roberto Ochoa

Signature of individual signing on behalf of the debtor

Printed name Roberto Ochoa

Position or relationship to debtor Member/Manager

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

 No Yes

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Southern District of Texas

In re ER 365, LLC

Case No. _____

Debtor Chapter _____ 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$15,000.00

Prior to the filing of this statement I have received \$15,000.00

Balance Due \$0.00

2. The source of the compensation paid to me was:

Debtor Other (specify)

3. The source of compensation to be paid to me is:

Debtor Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor' s financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/21/2025

Date

/s/ Randy W. Williams

Randy W. Williams
Signature of Attorney

Bar Number: 21566850
Byman & Associates, PLLC
7924 Broadway Ste 104
Pearland, TX 77581
Phone: (281) 884-9269

Byman & Associates, PLLC

Name of law firm

IN THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION

IN RE: **ER 365, LLC**

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 07/21/2025

Signature /s/ Roberto Ochoa
Roberto Ochoa, Member/Manager

Bayou City Mediation Center
4900 Fournace Place Suite 200
Bellaire, TX 77401

Cadillac Law
1341 W Mockinbird Ln #600W
Dallas, TX 75247

Carissa Clampett
c/o Moore & Associates
Lyric Centre
440 Louisiana Street Suite 1110
Houston, TX 77002-1055

Carla Trice
1124 Walling St
Houston, TX 77009

Caroline Morris
887 W Wintergreen Rd
Lancaster, TX 75134

Comcast Business
PO Box 70219
Philadelphia, PA 19176-0219

Crystal Resolutions
1085 Elkins Lake
305 Broadmoor Dr
Huntsville, TX 77340

Cypress Cash Flow Services
7050 Brookhollow West Drive #41507
Houston, TX 77040

Decaan & Bach
Attn: Michael Bach
25 Whitney Drive Suite 106
Milford, OH 45150

DeHaan & Bach
25 Whitney Drive Suite 106
Milford, OH 45150

Diamond McCarthy LLP
Two Houston Center
909 Fannin 37th Floor
Houston, TX 77010

Direct Radiology
22100 Bothell Everett Hwy Bldg C
Bothell, WA 98021

DirecTV AT&T
c/o CT Corporation
1209 Orange Street
Wilmington, DE 19801

Dykema
400 Renaissance Center
Detroit, MI 48243

El Paso Emergency Room
3281 Joe Battle Blvd
El Paso, TX 79936

Elavon
2103 Blue Willow Dr
Houston, TX 77042

MD Estate of Robert J. Phelan
9231 Westview Drive
Houston, TX 77055

Fran Brochstein
PO Box 1925
Marble Falls, TX 78654

GE Healthcare
3615 Willowbend Blvd
Houston, TX 77054

Gordon Davis Johnson Shane
4695 N Mesa St
El Paso, TX 79912

Heat Transfer Solutions
3350 Yale St
Houston, TX 77018

Henry Schein
4333 W Sam Houston Pkwy N
Houston, TX 77043

Janice Puncy Slaughter
5735 Hirondel Street
Houston, TX 77033

Joseph Maslar, MD, PLLC
c/o Rusty Hardin & Associates LLP
5 Houston Center
1401 McKinney Street Suite 2250
Houston, TX 77010

Justice David L Hodges
214 Laurel Oaks Ln
Crawford, TX 76638

Justice Guadalupe Rivera
14 Silver Crest Drive
El Paso, TX 79902

Kim Carmack
710 Lost Star
San Antonio, TX 78258

KM Law PLLC
3955 Fort St
Lincoln Park, MI 48146

Laconda Davies Goree
14275 Midway Rd
Addison, TX 75001

Law Office of Frederick
Wagner
9839 Vogue Ln
Houston, TX 77080

Linda Bass
ADR4U2
PO Box 996
Keller, TX 76244

Making Talk Work
Attn: Jen Sims
Address
Austin, TX 73301

McKesson
20710 Hempstead Rd
Houston, TX 77065

Melanie Grimes
Turley Law
6440 N Central Expy Suite 760
Dallas, TX 75206

Montrose ER LLC
8007 Walnut Hill Ln
Dallas, TX 75231-4313

Montrose ER, LLC
c/o Matthew Rinaldi
Registered Agent
5150 Lemmon Ave #108
Dallas, TX 75209

Preston Hollow Loan
8007 Walnut Hill Ln
Dallas, TX 75231

Quantas Healthcare
Management
5150 Lemmon Ave Suite 108
Dallas, TX 75209

Quest Lab
1631 North Loop W Suite 170
Houston, TX 77008

Ricoh Business Solutions
THIS ADDRESS PERMANENTLY CLOSED
2900 North Loop W Suite 100
Houston, TX 77092

Rochal Imaging
2717 Commercial Ctr Blvd Ste E221
Katy, TX 77494

Rokes Mediation
49 San Jacinto St Suite 220
Houston, TX 77002

Ronald L Johnson
6025 Sun Ray Drive
Denton, TX 76208

Stories to Solutions
923 Congress Ave Suite 300
Austin, TX 78701

The Davis Law Firm
3100 Richmond Ave Suite 480
Houston, TX 77098

The Peace Group
3838 N Sam Houston Pkwy E Suite 175
Houston, TX 77032

Tom Bartley
116 South Park
Brenham, TX 77833

Totz Ellison & Totz
Attn: Andrew Totz
2211 Norfolk Suite 510
Houston, OH 77098

Triple D Uniform
4031 Southerland Rd
Houston, TX 77092

TyBrion Services
5920 Lovell Ave
Fort Worth, TX 76107

Tyvan Billing
6030 S Rice Suite C
Houston, TX 77081

Zhang Yan
349 Queensbridge Way
Henderson, NV 89074